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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		EN 11358
First Named Inventor		DAVIE
COMPLETE IF KNOWN		
Application Number		/
Filing Date		
Group Art Unit		
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Non-Binding Fully Retractable LATCH ASSEMBLY

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable).

Application Number

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below

Name Philip H. Burrus, IV

Address Intellectual Property Department

Address 8000 West Sunrise Boulevard - Room 1610

City Fort Lauderdale	State Florida	ZIP 33322
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Country United States	Telephone (770) 338-3227	Fax (847) 761-1288
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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Given Name (first and middle [if any]) SEAN NATHAN	Family Name or Surname DAVIE
--	------------------------------

Inventor's Signature <i>Sean N. Davie</i>	Date 12/14/01
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Residence: City LAWRENCEVILLE, GEORGIA	State GA	Country USA	Citizenship US
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Mailing Address 719 SIMON WAY

Mailing Address

City LAWRENCEVILLE	State GEORGIA	ZIP 30045	Country USA
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NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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Given Name (first and middle [if any]) WILLIAM C.	Family Name or Surname PHELPS, III
---	------------------------------------

Inventor's Signature <i>A.C.P.D.H.</i>	Date 12/14/01
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Residence: City LAWRENCEVILLE	State GA	Country USA	Citizenship US
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Mailing Address 2105 SANDOWN COURT

Mailing Address

City LAWRENCEVILLE	State GEORGIA	ZIP 30043	Country USA
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/81 (11-96)

Approved for use through 6/30/99. OMB 0651-0035

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**POWER OF ATTORNEY OR
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APPLICATION**

Application Number	
Filing Date	
First Named Inventor	DAVIE
Group Art Unit	
Examiner Name	
Attorney Docket Number	EN 11358

I hereby appoint:

Practitioners at Customer Number

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Number Bar Code
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OR

Practitioner(s) named below:

Name	Registration Number
Philip H. Burrus, IV	45, 432
Scott Kevin Pickens	34, 696

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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I am the:

Applicant.

Assignee of record of the entire interest

Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

Name William C. Phelps Jr

Signature W.C.P.Jr

Date 12/14/01

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APPLICATION**

Application Number	
Filing Date	
First Named Inventor	DAVIE
Group Art Unit	
Examiner Name	
Attorney Docket Number	EN11358

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Philip H. Burrus, IV	45, 432
Scott Kevin Pickens	34, 696

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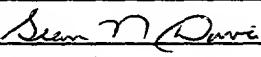
<input type="checkbox"/> Firm or Individual Name		
Address		
Address		
City	State	ZIP
Country		
Telephone	Fax	

I am the:

Applicant.

Assignee of record of the entire interest
 Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

Name	SEAN DAVIE
Signature	
Date	12/14/01

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